

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

11/630,078

FILING DATE

12-19-06

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						
2	1		1			
3		2		2		
4		2		2		
5		2		2		
6	1		1			
7	1		1			
8		2		1		
9	0		2			
10	1		2			
11	1		2			
12	1		2			
13	1		1			
14	1		1			
15	1		1			
16	1		1			
17	1		1			
18	1		1			
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49						
50						
TOTAL IND.	2		2			
TOTAL DEP.	22	←	25	←	←	
TOTAL CLAIMS	24		27			

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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99						
100						
TOTAL IND.			↓		↓	
TOTAL DEP.		←		←	←	←
TOTAL CLAIMS						